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CONFIRMATION NO. 2139

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|--|---|-----------------------------------|---|---------------------------------------|--------------------------------|
| SERIAL NUMBER 09/839,643 | FILING OR 371(c) DATE 04/20/2001 RULE | CLASS 604 | GROUP ART UNIT 3743 | ATTORNEY DOCKET NO. 1291-01 | |
| APPLICANTS Gad Keren, Qrxat-Ono, ISRAEL; Randy Kesten, Mountain View, CA; | | | | | |
| ** CONTINUING DATA ***** | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/14/2001 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY ISRAEL | SHEETS DRAWING 4 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 2 |
| ADDRESS 44909 | | | | | |
| TITLE Methods and apparatus for reducing localized circulatory system pressure | | | | | |
| FILING FEE RECEIVED 1592 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |